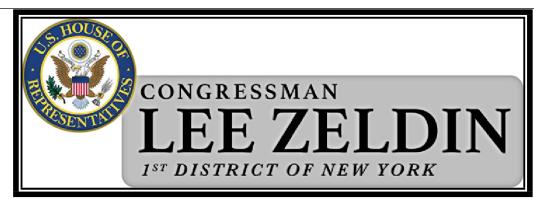


## **Service Academy Nomination Checklist**

Application Due Date: October 1, 2021 Supplemental Information Due Date: October 8, 2021 Name:
Town:
Phone:
Cell:
Please be sure that you are a current, legal resident of the First Congressional District of New York. Please ca 631-289-1097 with any questions. Once your completed application has been received along with all supplemental information, you will be contacted with your assigned interview date and time.
If document is contained in file, please check off below:
Photo:
Application:
Essay (500 words):
"Why I want to attend a Service Academy and why I should receive a Congressional Nomination."
SAT/ACT Score Reports:
High School Transcript:
Reference Letters: 1 2 3
Identify which references are missing (if any):
Please remove ALL staples/clips, etc. from documents. <u>Use a large paperclip to secure entire packet</u> together in the order in which the documents are listed above



### APPLICATION FOR A UNITED STATES SERVICE ACADEMY NOMINATION

### **Personal Information:**

Last Name:	First Name:		_M.I
D.O.B			
Street Address:			
City:	Zip Co	de:	County:
Home Phone:		Cell Phone:	
Email Address:			
Mailing Address (If different tha	n above, include P	.O. box if applicable)	
Father's Name:			
Street Address:			
City:Zi	p Code:	Cour	nty:
Mother's Name:			
Street Address (If different than	father's):		
City:Zi	p Code:	Cou	inty:

might Sch	ool:	
City:		Date of Graduation:
Counselo	or:	Phone:
Grade Po	oint Average:	
<u>Schola</u>	stic Honors:	
Freshn	nan:	
Sopho	more:	
Junior:		
Senior	:	
College	e:	
College		
College	e:	
College *Addit	e:	ary
College *Addit Please co	e:ional paper may be used if necessa	ary
*Addit *Addit <u>Please co</u> College:_	e:ional paper may be used if necessa	ary any college education:
*Addit *Addit <u>Please co</u> College:_	e:ional paper may be used if necessa pmplete the following if you have	ary any college education:
*Addit  *Please co  College:_  Major:_	e:ional paper may be used if necessa pmplete the following if you have	ary any college education:
*Addit  *Please co  College:_  Major:_	e:ional paper may be used if necessand paper may be used if necessard paper may be used in the necessard paper may b	any college education:  Credit Hours Completed:
*Addit  *Please co  College:  College	e:ional paper may be used if necessare    Description	any college education:  Credit Hours Completed:  Please have all scores sent to Congressman
*Addit  *Please co  College:  College	e:ional paper may be used if necessary  complete the following if you have  e Entrance Examinations:  1st exam date:	any college education:  Credit Hours Completed:  Please have all scores sent to Congressman  Zeldin's District Office. The codes to do so are
*Addit  *Please co  College:_  Major:_  College  ACT	e: ional paper may be used if necessary complete the following if you have  e Entrance Examinations:  1st exam date: 2nd exam date:	any college education:  Credit Hours Completed:  Please have all scores sent to Congressman  Zeldin's District Office. The codes to do so are  SAT: 2076

Include clubs, sports, etc. Include lea	adership positions held and Varsity Letters earned. Please also include
out of school activities.	
Freshman:	
Sophomore:	
Junior:	
Senior:	
College:	
*Additional paper may be used if ne	cessary
Medical:	
Have you ever had asthma or any ot	ther chronic respiratory ailment?
Yes: No:	
If yes, explain:	
Do you have 20/20 vision? Yes	No
Other Potential Sources of Nominat	tions:
Please indicate all other officials who	om you are requesting a nomination from:
Senator Gillibrand:	Senator Schumer:
Vice President Harris:	

Please rank the academies in order of your interest. If	not interested in a specific academy, write "N".
U.S. Air Force Academy (Colorado Springs, CO):	
U.S. Merchant Marine Academy (Kings Point, NY):	
U.S. Military Academy (West Point, NY):	
U.S. Naval Academy (Annapolis, MD):	
Employment History:	
Please list any part/full time jobs you hold/held.	
1. Employer:	
Dates employed:	Hours per week:
Manager's name:	Phone:
2. Employer:	
Dates employed:	Hours per week:
Manager's name:	Phone:
3. Employer:	
Dates employed:	Hours per week:
Manager's name:	Phone:
*Additional sheets may be used if necessary	
Acknowledgement: I request that Congressman Lee Zeldin consider my ap academy/academies that I have indicated above. I und acceptance into the academy, and that acceptance can to the academy before requesting a nomination. I understand that the deadline for applications is Fridat for the receipt of additional documentation is Friday, Congressed information by these deadlines, I understant	derstand that receiving a nomination is not the same n only come through the academy itself. I have app ny, October 1, 2021. I also understand that the dead October 8, 2021. If I have not submitted all of the

### **References:**

The applicant should submit three references attesting to the applicant's qualifications and motivation to attend a service academy (reference forms are attached). Those listed as references should not be relatives of the applicant. Preferred references are high school instructors, guidance counselors, coaches, club advisors, or current/former employers.

Please list the names of individuals who will be submitting references on your behalf:

1. Name:		
Street Address:		
City:	State:	Zip:
Relationship to Applicant:	Daytime Phone:_	
Length of time known by Applicant:		
2. Name:		
Street Address:		
City:	State:	Zip:
Relationship to Applicant:	Daytime Phone:_	
Length of time known by Applicant:		
3. Name:		
Street Address:		
City:	State:	Zip:
Relationship to Applicant:	Daytime Phone:_	
Length of time known by Applicant:		

# RETURN THE ABOVE APPLICATION BY EMAIL, FAX, OR POSTMARKED NO LATER THAN FRIDAY, OCTOBER 8, 2021 TO:

**Email:** 

mark.woolley@mail.house.gov

Fax: 866.404.6613

Mail:

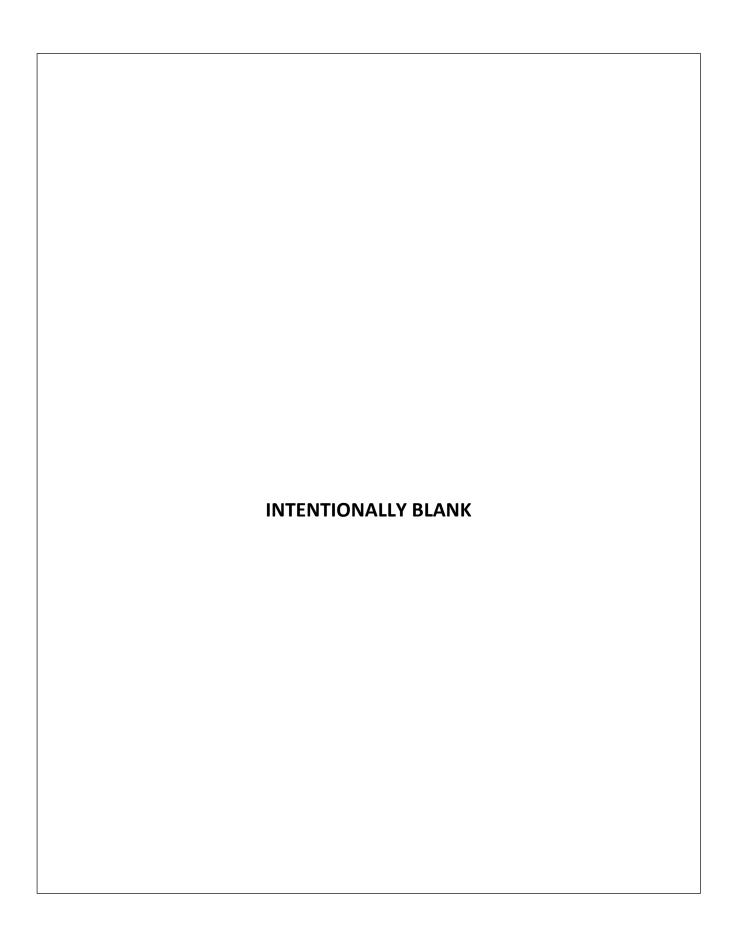
Congressman Lee Zeldin
Attn: Service Academy Nominations
31 Oak Street, Suite 20
Patchogue NY, 11772

(NOTE – If you submit via email, be sure to place the words "Academy Nominations 2021" in the "Subject" line.)

### **Authorization for Release of Information:**

If I am selected for an appointment by an academy and was nominated by Congressman Zeldin, I hereby authorize Congressman Lee Zeldin, and those acting on his behalf, to release my name and picture as an appointee in press releases to any media outlet. I also affirm that all prior information is accurate.

Signature (Student):	Date:
Signature (Parent/Guardian-if applicant is a minor):	





### **Service Academy Nomination Reference Form**

#### PLEASE USE THIS FORM AS A COVER SHEET

Applicant:		
Reference:		
Street Address:		
City:	State:	Zip:
Daytime Phone:	Length of time knowr	n by applicant:

The applicant has requested Congressman Lee Zeldin to consider him/her for a nomination for admission to one of the United States Service Academies. In your own words, please state your personal knowledge of his/her qualifications and motivation to attend a Service Academy.

Please sign and date your statement.

Return this form and your statement by email, fax, or postmarked no later than Friday, October 9, 2020 to:

Email:

mark.woolley@mail.house.gov

Fax: 866.404.6613

Mail:

Congressman Lee Zeldin
Attn: Service Academy Nominations
31 Oak Street, Suite 20
Patchogue NY, 11772